	First Steps Early Intervention System	
	LPCC COORDINATOR INTERVIEW FORM	
Name:	Years in Position:	
Interviewer:	Date:	

	LPCC COORDINATOR INTERVIEW FORM
Name	e: Years in Position:
Interv	riewer: Date:
LPCC	<u>Operations</u>
	Describe your role/responsibilities in the organizational structure of the Local Planning and Coordinating Council (LPCC). leadership of the LPCC consistent and well defined? How are decisions made? How are ittees utilized? Who develops the agenda? Who is in charge of the meeting?
2.	Describe how your relationship with the LPCC allows you to meet the expectations of your role.
3.	Describe your relationship with the System Point of Entry (SPOE) in your county?
4.	Describe the formal method of communication between the LPCC, SPOE and yourself as the County Coordinator.

Describe your role in developing and implementing the RFF in your county? 5.

Does t	he LPCC review activities on a routine basis?
6.	Do you feel that the coordination position is having a positive impact on the outcomes of the LPCC?
7.	In what area(s) would you like technical assistance to support council outcomes?
<u>Availa</u>	bility of Early Intervention Services
	How does the LPCC fulfill their responsibility for developing and maintaining the provider matrix? is the methodology for updating the provider matrix? What is the methodology for nination?
9. provide	Have all potential providers of EI services been contacted about their ability to er service in your county?

	FIRST STEPS EARLY INTERVENTION SYSTEM
	Local Planning and Coordinating Council (LPCC) Chairperson Interview Form
N	ame:Years in Position:
Ir	terviewer: Date:
LP	CC Operations
1.	Describe your responsibilities in the organizational structure of the Local Planning and Coordinating Council. Is the leadership of the LPCC consistent and well-defined? How are decisions made?
2.	Describe how your relationship with the LPCC allows you to meet the expectations of your role.
3.	Describe your relationship with the System Point of Entry (SPOE) in your county?
4.	Describe the formal method of communication between the LPCC, SPOE and yourself as the County Chairperson.
5.	Describe your role in developing and implementing the RFF in your county? Does the LPCC review activities on a routine basis?

6.	Do you feel that the chair position is having a positive impact on the outcomes of the LPCC?
7.	In what area(s) would you like technical assistance to support council outcomes?
Av	ailability of Early Intervention Services
8.	How does the LPCC fulfill their responsibility for developing and maintaining the provider matrix? What is the methodology for updating the provider matrix? What is the methodology for dissemination?
9.	Have all potential providers of EI services been contacted about their ability to provider service in your county?
	FIRST STEPS EARLY INTERVENTION SYSTEM

	LOCAL INTERAGENCY COORDINATING COUNCIL MEMBER INTERVIEW FORM
Name	e: Years on the LPCC:
Interv	viewer: Date:
LPCC	Involvement
1.	Describe your involvement with the LPCC.
2.	How does your involvement with the LPCC mesh with your other professional obligations? Is participation on the LPCC part of your job description or is it "extra"?
3.	Has the LPCC met your expectations of a local planning group? Why or why not? Are there any barriers?
<u>Local</u> 4.	Interagency Coordinating Council Operations Describe the organizational structure and membership of the LPCC. What committees have been established and how do they function? Is there a diverse representation of providers and families?
5.	Describe the involvement of family members in the LPCC. Do family members regularly attend meetings? What are the barriers to having a good representation of family members attend meetings? What strategies has your council attempted to boost family member participation?

6.	How is information disseminated to LPCC members? Do you feel that you are being adequately informed of what is happening at both the stand local level?
7.	Do you feel that the LPCC has made a positive impact on your local community? Why why not?
	reness of System Changes agency Relationships Do you feel that the LPCC is helping to enhance interagency relationships in your county
	_ o you rear man are _r o o re pring to armanes innoragency retained in your country
Gen (9.	
<u>Gen</u>	Please describe any additional concerns that you may have about the early intervention system that were not addressed in the above questions. Include any technical assistan

Pare	nt Name:	Date:	_
Child	d Name:	D.O.B	_
Refe	erral Date:	Eligibility/Diagnosis:	
		On-going Coordinator:	
	viewer:		
* Ha	ve copy of El Record	when interviewing	
<u>Gettir</u>	ng Started in Early I	<u>Intervention</u>	
1.	How did you find county?	out about the early intervention services that were a	available in your
2.		acted the early intervention system, were you pleased or your initial face-to-face meeting to occur?	with the amount
3.	about the early inter	rtable with the amount and type of information that you rvention system? rere you given? Brochures? Family handbook?	initially received
4.	As you work with w	arious providers in the early intervention system, are y	you having to tall
4.		ce or multiple times?	ou having to tell
<u>Findi</u>	ng Out About Your	Child's Strengths and Needs	
5.	Were you asked ab	out your concerns and priorities for your child?	
6.	How did you select	the individual(s) that completed your child's evaluation?	

- 7. Were your child's evaluation(s) and assessment(s) scheduled at times convenient for you and your family?
- 8. How were you involved with the evaluation(s) and assessment(s) of your child? Did you feel like you were a contributing member of the team?
- 9. Did the staff explain to you the evaluation(s) and assessment(s) results? Was there an additional information that you needed?

Developing Your Child's IFSP

- 10. Do you have a copy of the Individualized Family Service Plan?
- 11. How were the Outcomes of your child's IFSP developed?

 Do you feel that your priorities for your child and family were the most important considerations as goals and objectives were developed for the IFSP?
- 12. Do you feel that your child's IFSP was developed and implemented within a reasonable period of time?
- 13. Do you feel that your child's IFSP is a useful, working document that is beneficial to your child and your family?
- 14. Do you feel that the services your child receives assist in the accomplishment of the IFSP outcomes?

 Was your child able to receive all of the El services that you felt were needed?
- 15. How did you determine what service were needed and how those services are provided? Location/Frequency/Intensity?
- 16. Is there any thing that you would like improved in regards to the services your child is receiving?

17.	Are there any barriers to receiving EI services? Child care, missed work, etc.?
18.	Do the providers working with your child respect you and your family?
19.	Do providers listen to your input and concerns? Are providers easy to contact outside of treatment time?
<u>Your</u>	Rights/Your Child's Rights
20.	Do you understand what are your rights and responsibilities are in relation to the First Steps system? Do you have a copy of this information? Do you have copies of your signed consents?
21.	Were your rights explained to you in a way that was meaningful to you and your family?
22.	What would you do if you had a concern with the First Steps system or services?
23.	What difference has EI made for your child and family? Are you satisfied with the services you receive?
<u>Tran</u>	sition (may or may not be applicable to all families)
24.	Are there any issues for transition within the next 6 months? Is your child turning 3, attending childcare, moving, etc.?
25.	Does (Did) your child's IFSP include transition goals that address your child's and your family's needs and interests?
26.	Do (Did) you feel that you and your child are (were) being adequately prepared to move from 0-3 to 3-5?

27.	What could be added to the transition procedures to make it a more positive experience for you and your child?
Aware	eness/Involvement with the LPCC
28.	How are you involved with the Local Planning and Coordinating Council?
29.	As a parent, do you feel comfortable attending LPCC meetings? Are you actively involved with committee work?
30.	What would make it easier for you to be involved with the LPCC?
00.	What would make it dadier for you to be inverted min. the 2. CC.
Gene	ral Comments
31.	Describe any additional concerns or questions?
I 	
	FIRST STEPS EARLY INTERVENTION SYSTEM
	EI SERVICE PROVIDER INTERVIEW FORMAT
Nam	ne: Date:
Paye	ee:
Disci	ipline:

Average Caseload:	(# clients)	% Community	% Center-Based
Interviewer:			

Systems Coordination

- 1. Describe how you participate in the process for referrals to early intervention.
- 2. Describe how you participate in the process for evaluation and assessment.

 How do you receive referrals for E&A? How do you communicate results to the family and SPOE?
- 3. Do you have an opportunity to local provider meetings? How are informed about changes that occur in First Steps?

IFSP Development

- 4. Do you attend initial IFSP meetings and 6 month/yearly reviews?

 If no, why not? If yes, what is your role at these meetings? Describe the process that you use for disseminating quarterly reports?
- 5. How are 6 month and annual reviews scheduled and conducted for children and families receiving early intervention services?

 Do you receive 10 written notice?
- 6. How are parents involved with the development of the IFSP, including goals and objectives? How are they involved with the review of the IFSP, including goals and objectives?

Involvement with the LPCC

7. How are you involved with the LPCC?

Are your concerns or suggestions addressed by the LPCC?

Family and Provider Relationship

8. Do you feel that the providers of early intervention services in your area have positive working relationships with each other? Give examples if possible.

How has the LPCC helped/hindered these relationships? Give examples if possible.

9.	Do you feel that you and other service providers have positive relationships with the children and families that you serve?
<u>Trans</u>	ition Procedures
10.	Describe the transition process that takes place for children and families as they approach the age of three.
11.	In your county, are children able to easily transition to other services when the child turns three?
<u>Gener</u>	ral Early Intervention Services
12.	Are there any early intervention services that are limited or lacking in your county? What are the barriers to having these services available for children and families?
13.	Describe any additional concerns that you may have about early intervention services that were not addressed in the above questions. Include any technical assistance needs that you feel would be beneficial to you and your county.
14.	Please describe any aspects of your local early intervention services system that you feel are particularly noteworthy.
	FIRST STEPS EARLY INTERVENTION SYSTEM
	SERVICE COORDINATOR INTERVIEW FORMAT
Name	e: Date:
Interv	viewer:

Functions of the Service Coordinator

1. What is the process in which you receive referrals from the SPOE? What written information do you receive?

2.	How many families do you work with as a service coordinator? How much time per week do you spend with each family? How many counties do you work with?
3.	Describe your role/function as the service coordinator for eligible children. What has been most helpful to you in gaining knowledge about your role? What activities have enhanced you abilities? What activities would improve your abilities?
4.	Do you regularly attend State First Steps regional meetings?
<u>Intera</u>	gency and Family Relationships
5.	Describe your relationships with the early intervention providers in your county. Are providers receptive to referrals for service? Do you feel comfortable working with early intervention providers as part of the multi-disciplinary providers?
6.	Do the families consider themselves a part of the multi-disciplinary team? Do families contact you first if an issue arises?
<u>Locali</u>	Planning and Coordinating Council Involvement
7.	Describe your involvement with the LPCC.

8.	Do you feel that the LPCC is functioning well as a planning group?						
Rights	s and Procedural Safeguards						
9.	Describe how and when you tell parents about their rights and procedural safeguards? What materials you give to families?						
IFSP [Development and Review						
10.	What is your role at the initial and subsequent IFSP meetings?						
11.	How are 6 month and annual reviews scheduled and conducted for children and families receiving early intervention services? Do you review all quarterly progress reports with the family?						
12.	How are parents involved with the development of the IFSP, including goals and objectives? How are parents involved with the review the IFSP, including goals and objectives?						
<u>Transi</u>	tion Procedures						
13.	Describe the transition process that takes place for children and families at various staged in their involvement in First Steps? Describe your role in the transition process.						
14.	In your county, are children able to easily transition to other services?						

Early Intervention Services

15.	Are there a	ny early interve	ention services	s that are lim	nited or lacking	in vour	county?

General

- 16. Please describe any additional concerns that you may have about early intervention services that were not addressed in the above questions. Include any technical assistance needs that you feel would be beneficial to you and your county.
- 17. Please describe any aspects of your local early intervention services system that you feel are particularly noteworthy.

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